

SEE



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## TRANSMITTAL FORM

*(be used for all correspondence after initial filing)*

		Application Number	09/803,323
		Filing Date	March 9, 2001
		First Named Inventor	Jean Thierry Audren
		Group Art Unit	
		Examiner Name	
Total Number of Pages in This Submission	8	Attorney Docket Number	15675P350

### ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application  <input checked="" type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):  <div style="border: 1px solid black; padding: 5px;">return postcard; declaration and power of attorney; copy of Notice</div>
<div style="border: 1px solid black; padding: 5px;">Remarks</div>		

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Eric S. Hyman, Reg. No. 30,139 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN
Signature	
Date	4/13/01

### CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: 4/13/01

Typed or printed name	Kumiko, Alexander
Signature	
Date	4/13/01

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# FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

**TOTAL AMOUNT OF PAYMENT** (\$ 130.00)

## Complete If Known

Application Number	09/803,323
Filing Date	03/09/01
First Named Inventor	Jean Thierry Audren, et al.
Examiner Name	
Group Art Unit	
Attorney Docket Number	15675P350

## METHOD OF PAYMENT (check one)

1.  The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number 02-2666  
Deposit Account Name Blakey, Sokoloff, Taylor & Zafman LLP

Charge Any Additional Fee Required  
Under 37CFR 1.16 and 1.17

See 37 CFR 1.27  
See 37 CFR claim small entity status.

2.  Payment Enclosed:

Check  Money  
 Order  Other

## FEE CALCULATION

### 1. FILING FEE

#### Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
101	710	201	355	Utility filing fee	
106	320	206	160	Design filing fee	
107	490	207	245	Plant filing fee	
108	710	208	355	Reissue filing fee	
114	150	214	75	Provisional filing fee	

**SUBTOTAL (1) (\$)**

### 2. CLAIMS

Total Claims	Independent Claims	Extra	Fee from below	Fee Paid
15	1	=	X	=
1	1	=	X	=

Multiple Dependent Claims

Large Entity Small Entity
Fee Code
103
102
104
109
110

Fee (\$)

203	9	Claims in excess of 20
202	40	Independent claims in excess of 3
204	135	Multiple Dependent claim
209	40	Reissue independent claims over original patent
18	9	Reissue claims in excess of 20 and over original patent

**SUBTOTAL (2) (\$)**

\*or number previously paid, if greater. For Reissues, see above

## FEE CALCULATION (continued)

### 3. ADDITIONAL FEE

#### Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late filing fee or oath	130
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for ex parte reexamination	
112	920	112	920	Requesting publication of SIR prior to Examiner action	
113	1,840	113	1,840	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for response within first month	
116	390	216	195	Extension for response within second month	
117	890	217	445	Extension for response within third month	
118	1,390	218	695	Extension for response within fourth month	
128	1,890	228	945	Extension for response within fifth month	
119	310	219	155	Notice of Appeal	
120	310	220	155	Filing a brief in support of an appeal	
121	270	221	135	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidably	
141	1,240	241	620	Petition to revive - unintentionally	
142	1,240	242	620	Utility issue fee (or reissue)	
143	440	243	220	Design issue fee	
144	600	244	300	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Petitions related to provisional applications	
126	180	126	180	Submission of Information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per property (times number of properties)	
146	710	246	355	Filing a submission after final rejection (37 CFR 1.129(e))	
149	710	249	355	For each additional invention to be examined (37 CFR 1.129(d))	
179	710	279	355	Request for Continued Examination (RCE)	
169	900	169	900	Request for expedited examination of a design application	
Other fee (specify) _____					

**SUBTOTAL (3) (\$)** 130.00

\* Reduced by Basic Filing Fee Paid

## SUBMITTED BY

Typed or Printed Name	Eric S. Hyman, Reg. No. 30,139	Complete (if applicable)
Signature		Date 01/17/01 Deposit Account User ID 02-2666

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